ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, state bar number, and address):	FOR COURT USE ONLY
TELEPHONE NO.: FAX NO. (Optional):	
E-MAIL ADDRESS (Optional):	
ATTORNEY FOR (Name):	
SUPERIOR COURT OF CALIFORNIA, COUNTY OF	
STREET ADDRESS:	
MAILING ADDRESS:	
CITY AND ZIP CODE:	
BRANCH NAME:	
CASE NAME:	
	OACE ANIMATED.
ORDER FOR WITHDRAWAL OF FUNDS FROM BLOCKED A	CASE NUMBER:
ONDER FOR WITHDRAWAL OF FUNDS FROM BLOCKED A	CCOONT
1. The petition of (name):	for withdrawal of funds
a. was heard ex parte.	
b. came on regularly for hearing in this court on (date):	
THE COURT ORDERS	
THE COURT ORDERS	
2. Petitioner is authorized to withdraw funds and the depository is ordered to	o allow the petitioner to withdraw funds, upon presentation
of a filed endorsed copy of this order, in the total amount of: \$	
3. The funds are located in the following account:	
a. Name and title on the account:	
b. Depository (name):	
(1) Branch:	
(2) Address:	
c. Account number:	
4. The funds are to be distributed by the depository, remittance payable as	follows:
a. Payee (name):	101101101
Amount: \$	
·	
b. Payee (name):	
Amount: \$	
c. Payee (name):	
Amount: \$	
d. Payee (name):	
Amount: \$	
Amount. $\psi$	
Additional payons and amounts to be distributed are listed an Attac	hmant 1
Additional payees and amounts to be distributed are listed on Attac	mment 4.
5. L The court further orders:	
6. Number of pages attached:	
6. Number of pages attached:	
Date:	
_	HIDGE OF THE SUBERIOR COURT
	JUDGE OF THE SUPERIOR COURT
	SIGNATURE FOLLOWS LAST ATTACHMENT Page 1 of